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CONFIRMATION NO. 3987

<b>SERIAL NUMBER</b> 10/730,699	<b>FILING OR 371(c) DATE</b> 12/08/2003 <b>RULE</b>	<b>CLASS</b> 073	<b>GROUP ART UNIT</b> 2855	<b>ATTORNEY DOCKET NO.</b> TOMZ 2 00436
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/432,057 12/09/2002 *me*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 03/09/2004 *here me*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 6	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

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## TITLE

Sight gauge shield and method

<b>FILING FEE RECEIVED</b> 394	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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